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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET					Application Number 10/599,024			Filing Date 18 September, 2006			To be Mailed		
Substitute for Form PTO-1360 (For use with Form PTO/SB/06)					Applicant(s) FURREI	R, ANDRE				Page 1 of 1		
							* May be	used for addi	tional claims	or amendm	ents		
CLAIMS	AS FILED 05/31/2009		AFTER FIRST AMENDMENT		AFTER SEC. AMENDMENT		*		*		*		
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